

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 10, 2006 08:00 AM
Secretary of State

DOCUMENT # 440924

1. Entity Name
HARRY GOODE'S OUTDOOR SHOP, INC.



Principal Place of Business

**1231 E NEW HAVEN AVE
MELBOURNE, FL 32901**

Mailing Address

**1231 E NEW HAVEN AVE
MELBOURNE, FL 32901**



07062006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-1508725** Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**GOODE (HARRY C) JR
1231 E NEW HAVEN AVE
MELBOURNE, FL 32901**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 8, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE **STV**
NAME **GOODE, RICHARD W**
STREET ADDRESS **1231 E NEW HAVEN AVE**
CITY-ST-ZIP **MELBOURNE, FL 00000,**

TITLE **PD**
NAME **GOODE, HARRY C JR**
STREET ADDRESS **1231 E NEW HAVEN AVE**
CITY-ST-ZIP **MELBOURNE, FL 00000,**

TITLE **SD**
NAME **GOODE, RICHARD W JR**
STREET ADDRESS **1231 EAST NEW HAVEN AVE**
CITY-ST-ZIP **MELBOURNE, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard W. Goode

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/7/06
Date

321-72-3-7751
Daytime Phone #